

UTILITY PATENT APPLICATION TRANSMITTAL

☐ DUPLICATE

Address to: Commissioner for Patents Box PATENT APPLICATION Washington, DC 20231	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Attorney Docket No.</td> <td>REF/FOSSHEIM/100</td> </tr> <tr> <td>First Named Inventor (or identifier)</td> <td>FOSSHEIM et al.</td> </tr> <tr> <td>Total Pages</td> <td>112</td> </tr> </table>	Attorney Docket No.	REF/FOSSHEIM/100	First Named Inventor (or identifier)	FOSSHEIM et al.	Total Pages	112
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Total Pages	112						

Transmitted herewith is a patent application under 37 CFR 1.53(b).

Entitled:	USE OF PARTICULATE CONTRAST AGENTS IN DIAGNOSTIC IMAGING FOR STUDYING PHYSIOLOGICAL PARAMETERS
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- ☒ 1. Submitted herewith are the following:
- 79 pages of specification.
 - ☒ Abstract.
 - 13 sheet(s) of drawings.
 - 22 claim(s).
 - ☒ Oath/Declaration signed by each inventor.
 - ☐ signed Inventor Small Entity Statement(s).
 - ☐ signed non-Inventor Small Entity Statement(s).
 - ☐ signed Small Business Small Entity Statement(s).
 - ☐ signed Non-Profit Small Entity Statement(s).
 - ☒ Preliminary Amendment.
 - ☒ Information Disclosure Statement(s).
 - 1 page of Form PTO-1449.
 - ☒ Assignment of the invention, Cover Sheet, and payment of the \$40.00 recordal fee.
 - ☐ certified copy of application no. _____ filed in _____. Priority is claimed.
 - ☒ check in the amount of \$ 786.00 including any assignment recordal fee.
- ☒ 2. The Commissioner is authorized to credit any overpayment and charge any deficiency in any fees required under 37 CFR 1.16 and/or 1.17, to Deposit Account No. 02-0200.
- ☐ 3. Insert before the first sentence of the specification: - - This application claims the benefit of provisional application number _____ filed _____. - -
- ☐ 4. Insert before the first sentence of the specification: - - This application is a Continuation-in-part of nonprovisional application number _____ filed _____. - -
- ☐ 5. Other: _____

THE FILING FEE IS CALCULATED AS FOLLOWS:				Basic Fee:	\$710.00	
Total Claims:	22	- 20 =	2	X \$18 =	36.00	
Independent Claims:	3	- 3 =	0	X \$80 =	0.00	
Correspondence Address: BACON & THOMAS, PLLC 625 Slaters Lane, 4 th Floor Alexandria, VA 22314-1176				Multiple Dependent Claim (add \$270.00):		
				Subtotal:		746.00
				50% Reduction if Small Entity Status:		
Phone: 703-683-0500		Fax: 703-683-1080		Total:	746.00	
Date:	Name:		Signature:		Reg. No.	
October 6, 2000	Richard E. Fichter		<i>Richard E. Fichter</i>		26,382	